

## **Application Data Sheet**

### **Application Information**

Application Type:: Nonprovisional  
Subject Matter:: Utility  
Title:: Keypads for oblique viewing  
Attorney Docket Number:: PER1.003  
Suggested Drawing Figure:: 6  
Total Drawing Sheets: 4  
Small Entity:: Yes  
Petition included?:: No

### **Applicant Information**

Applicant Authority type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Victor  
Middle Name:: G.  
Family Name:: Feller  
City of Residence:: Langhorne  
State of Residence:: Pennsylvania  
Street of mailing address:: 203 Sycamore Circle  
City of mailing address:: Langhorne  
State of mailing address:: Pennsylvania  
Postal or Zip Code of mailing address:: 19053-7222  
Applicant Authority type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Gerry  
Middle Name:: J.  
Family Name:: Elman  
City of Residence:: Swarthmore  
State of Residence:: Pennsylvania  
Street of mailing address:: 406 Yale Avenue  
City of mailing address:: Swarthmore

State of mailing address:: Pennsylvania  
Postal or Zip Code of mailing address:: 19081

**Correspondence Information**

Correspondence Customer Number:: 003775

**Representative Information**

Representative Customer Number:	003775
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**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Nonprovisional of	60/391,094	06/24/02